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ABSTRACT

This guide delineates steps for state involvement in early childhood and family education and related services, and synthesizes many state and federal activities that support at-risk children from birth through five years and their families. The guide is designed to help states expand early childhood and family education policies and programs by drawing upon the collective experience of other states. The guide begins with a list of recommendations for five areas for action in support of quality early childhood and family education. These areas include: (1) the state policy role; (2) national support; (3) coalitions and coordination; (4) program guidelines; and (5) staffing. The guide then presents an overview of the unmet needs of at-risk preschool-age children and obstacles to the provision of comprehensive coordinated services. The unmet needs and barriers to service provide the framework for the guide. The next section of the guide describes the context within which states are developing programs, and references federal and state initiatives and multi-agency efforts. There are citations of examples from research literature, and experiences of specific projects and states, which illustrate ways in which the unmet needs and barriers have been addressed. The final section explores policy considerations. Cited are 35 references. (RH)

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A GUIDE

FOR STATE ACTION:

EARLY CHILDHOOD & FAMILY EDUCATION

ADOPTED NOVEMBER 1988

The Council of Chief State School Officers (CCSSO) is a nationwide non-profit organization of the 57 public officials who head departments of public education in every state, the District of Columbia, the Department of Defense Dependent Schools, and five extra-state jurisdictions. CCSSO seeks its members' consensus on major education issues and expresses their views to civic and professional organizations, to federal agencies, to Congress, and to the public. Through its structure of standing and special committees, the Council responds to a broad range of concerns about education and provides leadership on major education issues.

Because the Council represents the chief education administrator in each state and territory, it has access to the educational and governmental establishment in each state, and the national influence that accompanies this unique position. CCSSO forms coalitions with many other education organizations and is able to provide leadership for a variety of policy concerns that affect elementary and secondary education. Thus, CCSSO members are able to act cooperatively on matters vital to the education of America's young people.

The CCSSO Resource Center on Educational Equity provides services designed to achieve equity in education for minorities, women and girls, and for disabled, limited English proficient, and low-income students. The Center is responsible for managing and staffing a variety of CCSSO leadership initiatives to provide better educational services to children and youth at risk to school success.

Council of Chief State School Officers

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Acknowledgements

The Council of Chief State School Officers (CCSSO) has, for the past two years, focused its work on the assurance of educational succcess for at-risk students. In the second year of this effort, the Council under leadership of President Verne A. Duncan placed special emphasis on activities relating to the education of young children and their families. Current research examining the effect of such services on later educational success supports such a strategy for all children, but particularly for those children and their families considered at risk.

As a part of this strategy the Council produced three documents designed to call attention to the needs of and successful services for young children and their families, to identify services currently available from the states, and to provide guidance to states about the necessary next steps to expand these services.

At the Annual Meeting in November, 1988 the Council unanimously adopted both the statement, "Early Childhood and Family Education: Foundation for Success" and the "Guide for State Action: Early Childhood and Family Education." A third document, the book of "State Profiles: Early Childhood Education, Parent Education, and Related Services", was released for public use at the meeting.

Many persons have had a direct responsibility for the preparation of these documents in support of comprehensive services for young children and their families. One year ago President Duncan appointed a Task Force on Early Childhood and Parent Education to oversee and direct all Council efforts in this area. The Task Force was chaired by Harold Raynolds, Jr., Massachusetts Commissioner of Education and included seven other chief state school officers: H. Dean Evans (Indiana), Richard A. Boyd (Mississippi), Linda Creque (Virgin Islands), Bill Honig (California), Wayne G. Sanstead (North Dakota), Ruth Steele (Arkansas), and Gerald N. Tirozzi (Connecticut). Task Force members deserve special thanks for their leadership role throughout the past year.

The three Council documents were based, to a large degree, on information collected by the CCSSO Study Commission about educational and related services currently provided by the states for young children and their parents. This effort was skillfully directed by the Study Commission President, Robert R. Hill, South Carolina Deputy Superintendent of Education, and its Executive Board. Ronald D. Burge, Oregon Deputy Superintendent of Public Instruction, deserves special recognition for his direct oversight of the collection of state information.

The Task Force on Early Childhood and Parent Education was supported by the staff of the Council's Resource Center on Educational Equity, directed by Cynthia G. Brown. Glenda Partee, Assistant Director of the Resource Center, was the primary author of the "Guide for State Action." Ann Samuel prepared the manuscript. Christopher Harris, also of the Resource Center, directed the collection and editing of the book of state profiles.

Recognition and appreciation are extended also to Anne Lewis who served as a consultant to the Council, providing creative and thoughtful assistance in drafting the Council statement.

Finally, the Council thanks the Carnegie Corporation of New York for its generous support of our early childhood and family education publications. The opinions expressed in these publications do not necessarily reflect those of the Carnegie Corporation.

Preface

Our concern is children—their health and nutrition, well being, care, safety, housing, and when these needs are met, their education. We know that children cannot gain from our schools the best that we offer unless other basic needs are met. Hence it is encumbent upon schools to consider and address child and family priorities and needs and work with other agencies which provide child and family support services. This knowledge has prompted the nation's chief state school officers to affirm a commitment to young children and their families and to explore ways that schools can work to support the development of a strong family curriculum—the precursor and facilitator of the school curriculum.

This commitment is expressed in the Council of Chief State School Officers' (CCSSO) 1988 theme, "Early Childhood and Family Education: Foundations for Success." This theme flows from the Council's 1987 policy on assuring school success for students at risk and is a mechanism for furthering the underlying principle of that policy: "to provide education programs and to assure other necessary related services so that this nation enters the 21st Century with virtually all students graduating from high school."

Throughout 1988, the Council has conducted a number of activities to make this theme a reality for children at risk of school failure. Foremost among these activities is the development of three interrelated documents: 1) "Early Childhood and Family Education: Foundations for Success," a statement on the nationwide importance of early childhood and family education; 2) "State Profiles: Early Childhood and Parent Education and Related Services," state-by-state profiles on state actions to meet the comprehensive needs of children ages zero through five and their parents; and this document, 3) "A Guide for State Action," delineating steps for state involvement in early childhood and family education and related services.

Although interrelated, the three documents are distinct publications and provide different levels of information. The statement provides a general overview of the issues and consequences to children and society if bold policies are not articulated and implemented to provide quality early childhood experiences and comprehensive family support mechanisms for those in need. It also sets forth the principles endorsed by the Council for state action in providing early childhood and family education and related services.

The state-by-state profiles is a resource document for use by state education agencies. It provides information on a variety of state-level programs and special initiatives spanning health, social services, and education agencies supporting young at-risk children and their families. Descriptions and contact names are provided to encourage communication among and within states so that policymakers can avoid reinventing the wheel, better utilize existing efforts and services, and increase inter-agency collaboration.

The Guide synthesizes many of the state and federal activities detailed in the state profiles that support at-risk children ages zero through five and their families. It is designed to assist states as they move from their current status with regard to early childhood and family education policies and programs by drawing

Continued on next page

upon the collective experience of other states. The expectation is that chief state school officers and state agencies could use such a guide in setting the direction and determining the next actions for implementation of programs in their respective states.

Information about state plans, programs, and actions in the profiles and guide comes primarily from the CCSSO Study Commission information collection instrument on early childhood education, child care, parental education, and health and social services programs for young children. This information was collected spring 1988. Responses were received from 50 states, two territorities, and the District of Columbia. Unless otherwise indicated responses apply to FY 1988 activities. The quality of responses received varied greatly from state to state and among agencies responding within states. This variability accounts for the differences in the amount of information included in the profiles and for possible missing examples of state initiatives in the guide.

Nevertheless this information provides the most comprehensive set of descriptions to date on state and agency actions to address the complex needs of young at-risk children and their families. The Guide and related publications do not represent the end of a process of self examination and assessment of services for these children and their families. Rather these compilations represent the beginning of a process whereby states can build upon and better tailor service systems to meet the evolving needs of children and families in our society.

The Council of Chief State School Officers strongly believes there is much at stake and much to gain through improved early childhood and family services in the states and is committed to expanding the availability of these services.

Verne A. Duncan
President
Council of Chief State School Officers

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Introduction

In the summer of 1988, the nation's chief state school officers met at their annual inservice training institute to explore among themselves and with recognized experts in the field the pressing issues relating to the provision of early childhood and family education. These educators were soon to acknowledge the interrelated nature of their education services to those of other service providers in addressing the needs of the total child undivorced from the family and other environmental and social influences.

Well documented is the:

- inability of children to benefit fully from the education resources available because of poor health or lack of family stability;
- loss in individual potential and damage that occurs when early interventions are not available to children at crucial points in their development or to their families when experiencing distress and dysfunction;
- high cost to society of remediation, special education, welfare services, adjudication, and rehabilitation resulting from a lack of early interventions; and
- loss in productivity to the work force of family members who cannot work or maintain employment because of the lack of proper child care arrangements.

Another concern relates to equity and the quality of early childhood experiences available to children and their families.

Quality early childhood programs are needed by children and families at all income levels. Early childhood programs provide young children with experiences that promote intellectual, social, and physical development. They may also serve the child care needs of families. The term encompasses programs found in preschools, nursery schools, and day care for young children in homes and centers (Sweinhart and Koshel, 1986). Comprehensive early childhood programs provide necessary services in addition to those that are strictly developmental or academic.

Despite the wealth of data on the benefits of early childhood programs to low-income children, the accessiblility of programs is strongly linked to family income and education levels. Children from low-income families are less than half as likely to attend preschool programs as are more advantaged children (*Child Care*, 1987). And among the largest federal and state efforts to help families pay for child care, dependent care tax credits, assistance is of negligible benefit for low-income families.

According to Morgan (1987), policymakers, the media, and the public must consider a vision for the future which combines "the policy objectives of support for working parents on whom we rely for our national productivity and economic development, with education for young children many of them living in poverty, who are the citizens and workers of tomorrow" (p. l). This vision has prompted governments at local, state, and federal levels to formulate responses to the pressing concerns for child care and early education and to initiate new partnerships with families in support of the future welfare and productivity of all young children.

The Council of Chief State School Officers (CCSSO) in its policy statement adopted November 1987, "Assuring School Success for Students At Risk," set forth a set of guarantees which state law should provide to address the special needs of at-risk children and youth. Among these guarantees are a "parent and early childhood development program beginning ideally for children by age three, but no later than age four," and "supporting health and social services to overcome conditions which put the student at risk of failing to graduate from high school" (*Assuring*, 1987, p. 3).

In striving to provide these guarantees, states must address a variety of concerns and realities and schools must develop new roles and seek new partnerships among health and service agencies, early childhood professionals and paraprofessionals, and parents.

Purpose

The *Guide for State Action: Early Childhood and Family Education* grows out of the recognition of the difficult task facing state education agencies in addressing this new charge. Since the states are at very different stages of implementation of early childhood and family education programs, the Council could not recommend a single approach as if all of the states were proceeding at the same rate. Some states support family education programs or prekindergarten programs; others do not. Some have interagency organizations or groups which focus on services for children from birth through age 5; others do not.

The Guide is designed to assist each state as it moves from its current status with regard to early childhood policy by drawing upon the collective experiences of other states. The expectation is that a chief could use this Guide in setting the direction and determining the next actions for implementation of programs in his or her state.

The Guide begins with a list of recommendations addressing five areas for action in support of quality early childhood and family education. They encompass: the state policy role; national support; coalitions and coordination; program guidelines; and staffing.

The next section presents an overview of the unmet needs of at-risk children ages zero through five and obstacles to the provision of comprehensive and coordinated services as described by the states responding to the CCSSO Study Commission information collection instrument administered in spring 1988. These unmet needs and barriers to comprehensive service provide the framework for this Guide. The following section describes the context within which states are developing programs and references federal and state initiatives as well as multi-agency efforts. Next, examples are cited from the research literature and experiences of specific states and projects which illustrate how the unmet needs and barriers have been addressed or resolved in other settings and the interagency collaborations and coordinated activities which have resulted. The final section contains policy considerations.

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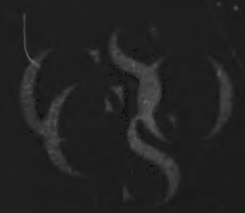

EARLY CHILDHOOD & FAMILY EDUCATION

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Recommendations

Finding solutions to the urgent national need for quality early childhood and family education services must be among the highest priorities for national, state, and local decisionmakers. Now and in the years ahead state policymakers should undertake a number of informed and coordinated actions across agencies to put in place programs and services which meet the needs of children and families. Additionally, they should mobilize new and existing resources in support of these programs and services. If the needs of young at-risk children and their families are to be met, and quality early childhood and family education are to be widely available, substantial changes must be made in policy and practice. This will affect both educators and other service providers.

In recognition of the challenge and the task ahead the Council of Chief State School Officers makes the following recommendations regarding: state policy, national support, coalitions and coordination, program guidelines, and staffing.

State Policy Role

- States should provide comprehensive early childhood and family education services for children from the earliest moments of life who are at risk of later school failure and their families, with universal access for all children and families as the ultimate goal.
- Each state should establish a state council to advise the state education agency in planning for delivery of comprehensive early childhood and family education services. Each state should encourage establishment of local councils to advise local education agencies in planning for delivery of such services.
- States should establish standards and regulations to ensure high quality comprehensive early childhood services, including but not limited to: developmentally appropriate practices; family involvement and education; appropriate adult-child ratios, facilities, staff training and credentialing; and optional full-day and full-year schedules.
- States should develop multiple measures for assessing the readiness and development of young children and guard against inappropriate use of assessment instruments for placement and labeling.
- Comprehensive early childhood education services should be funded through existing federal, state, and local resources for child and family services and augmented through new public and private funding.
- States should establish and operate comprehensive early childhood services for their employees as models for other public agencies and the private sector.

National Support

- The federal government should expand resources for support to the states for early childhood education and related child care for children at risk and for family education, with universal access for all children and families as the ultimate goal.

	• States should participate in the development of a national clearinghouse on model programs, effective practices, and relevant research. States should develop and maintain a dissemination system of information on the benefits of early childhood services for children, their families, and the community. • The national education agenda should include resources for the continuation of research on early childhood services.
Coalitions and Coordination	• Each state should develop an integrated policy and action plan which encompasses the continuum of statewide services and requires collaboration among all agencies providing services to children and families. • State plans for comprehensive early childhood and family education services should acknowledge, build upon, and enhance successful systems and providers, both non-profit and for-profit. • States should establish coalitions of educators, human services providers, business leaders, and citizens to assist with securing funding, ensuring access, and providing staff training for the delivery of comprehensive early childhood and parental services.
Program Guidelines	• Comprehensive early childhood programs should contain both child care and developmentally appropriate education components. The programs should offer a continuum of services spanning the needs of children and their families including, but not limited to, health, social services, nutrition, transportation, program facilities, and adult basic education. All programs must also be sensitive to the culture and language of the child and family. • States should require the integration and extension of the developmental approach and other elements of comprehensive high quality early childhood services into elementary education. • States should establish a data collection and monitoring system which, among other things, identifies the needs of young children and promotes the coordination of services for them.
Staffing	• States should establish standards for differential staffing of early childhood services. These standards should be based on performance competencies as well as training requirements for both professional and paraprofessional staff. Supervision and ongoing training should be provided by qualified staff persons at each site. • States should establish early childhood staff training programs on family involvement and education.

Unmet Needs of At-Risk Children from Birth Through Age Five: A State Assessment

In spring 1988, state education agencies from 50 states, two territories, and the District of Columbia responded to a CCSSO Study Commission information collection instrument on early childhood education, child care, parental education, and health and social services programs for young children. They reported specifically on the unmet needs of children at risk of later school failure and their families.

There is a strong consensus among states around two broad areas of need for at-risk children from birth to age five:

- Access to and availability of affordable, high quality early childhood education and child care (including pre- and after-school) programs.
- Access to and availability of comprehensive services to address the health, social, nutritional, transportation, and educational needs of these children and their families.

The remaining categories of needs described by the states deal with the states' capacities to systematically address these unmet needs in areas such as:

- Establishment of quality indicators of early childhood education and child care, reliable and valid measures of child development, and teacher training and standards.
- Coordination of service delivery among disciplines and service agencies.
- Establishment of a data collection, information sharing, and monitoring system capability.
- Establishment of effective programs and policies.
- Provision of resources to ensure that the needs of at-risk children and their families are met.

Affordable, High Quality Early Childhood Programs

States acknowledge the need for quality early childhood development programs, child care programs, or both. Some states express this need solely in terms of a definition of children at risk, while other states indicate a general need applicable to all children in the state. Some states specify this need in the context of the needs of working parents. Others refer to the special problems of children from rural areas. Throughout, however, the gap between the need for service and the availability of service is apparent.

States recognize that the provision of early childhood education and child care programs hinges on the ability to assure quality programs for children and families who can benefit most from these services. Defining what constitutes quality early childhood education and child care and understanding how quality programs are instituted and maintained is central to any state attempt to address these needs.

States identify a number of needs including the provision of:

- well-trained teachers and the availability of personnel and training to handle proposed expansion;

- a safe, organized, and nurturing environment;
- links between education and care to provide for full-day activities;
- developmentally appropriate curricula and practices;
- sufficient funding to allow for lower teacher-child ratios; and
- quality programs and materials.

States also cite the general need to identify and address the needs of the at-risk child before the onset of failure. Also noted is the absence of quality indicators and consensus regarding the broad goals of early childhood development as well as the need for more reliable and valid measures of child development. Indicated is the need to equip teachers through pre- and inservice activities with the skills and knowledge to meet the various needs of children at risk as well as with an understanding of family and cultural variables and their impact on the planning and delivery of education services. Finally, states are seeking ways to offset the developmentally inappropriate practices that currently exist in child care/education for children from infancy through age eight.

The following page lists selected state examples of unmet needs.

In **MINNESOTA** many Head Start eligible children are not served due to inadequate resources, and families of children at risk of school failure often cannot afford existing good programs or do not live where such programs are available. Minnesota also described the need for quality full-day child care or child care offered in conjunction with a child development program that provides for the needs of the whole child.

NEBRASKA indicated that with the exception of Head Start, no comprehensive services are available and even Head Start is not available in large portions of the state. Since 1967, state law (79-444) has permitted schools to use local funds to serve prekindergarten children; however, few schools have elected to do so. The rural nature of the state has made the problems of young at-risk children appear less prominent there than in states with large urban concentrations of poor people.

FLORIDA defined the population in need of appropriate developmental education and affordable day care as educationally, economically, and developmentally at-risk zero to five year olds.

MISSOURI indicated the need for quality child care for disadvantaged children in heterogeneous programs.

INDIANA cited the need for adequate, affordable, accessible day care, especially infant care.

PENNSYLVANIA expressed the need for sufficient care slots and for the planned expansion of school affiliated child care.

ALASKA, for quality home and center child care and public preschool programs.

MARYLAND and **NEW JERSEY**, for pre- and after-school programs.

OKLAHOMA, for day care facilities and for comprehensive, state funded early childhood education for all children in the state.

WISCONSIN's need is for quality preschool (educational) social and learning experiences in an organized environment, based on sound developmental practices and supervised by trained staff. The need also exists for safe, healthy, nurturing, consistent, stable alternative day care arrangements for working parents.

NEW MEXICO described its need for provision of after-school care, day care, nursery care, preschool, and school readiness programs. Early childhood developmental programs for at-risk children and provision of adequate care for the multiple handicapped were also cited.

MISSISSIPPI indicated a need for early childhood development programs and for affordable/available child care for the handicapped.

NORTH CAROLINA's need is one of degree—not enough programs to serve all children at risk.

ARKANSAS cited the need for adequate facilities and slots for day programs (day care, nursery schools) for all children in the risk category.

HAWAII expressed the need for respite care for children whose parents participate in the state's early intervention parent-child education program and attention to low-income (specifically ethnic) groups with environmentally deprived children.

In **COLORADO**, only 25 percent of Head Start eligible children are served; hence there is a need to expand quality child care and preschool services.

SOUTH CAROLINA cited the need for continued financial support for the state-funded child development program and increased emphasis on coordinated services for at-risk children and their families.

Availability of Comprehensive Services

In many states quality education and care comprise only one part of a range of needed services for children and their families. States acknowledge the need for affordable high quality comprehensive services which address health, social, nutritional, education, and often housing needs. Included also is the need for prenatal and post partum care and family education. States stress the need for general prevention services, primary, and major health care as well as mental health services and residential centers.

Many at-risk children who require early intervention services go unserved. Additionally, many children who receive services are underserved because they do not get the quantity of direct intervention needed or the variety of related services (e.g., occupational, physical, and speech therapy) they need. One state indicated it is not serving all at-risk four-year olds and services to zero to four-year olds are available only through Head Start and special education services.

CONNECTICUT described the composite nature of the needs and the inequities sustained by young at-risk children in the state: "Not all of the state's children under the age of five have equal access to the health, education, and social services they need. A family support system is not in place. Infant mortality rates remain high in our cities. Many children live in crowded, unsafe conditions; many are born to very young parents; high quality, affordable, and accessible child care is not generally available, nor are other family support services."

1. Family Education

Many states view family development as an essential component for a comprehensive approach to meeting the needs of children. They recognize the family's central role in the early development of children and the prevention of later school failure and, consequently, have set priority on promoting family well-being. They need resources to promote positive parenting skills and reduce family isolation. Some families need direct intervention services in order to support and guide their children adequately. Parenting education is especially important for teenage parents. Family outreach was also cited as integral to any attempt to provide services to all eligible children and families.

Families of at-risk students often have limited information about the comprehensive needs of their children. Interrelated needs are for child care, job training, and life management skills. Training models for basic skills instruction, job training, and parenting could be devised and expanded using community resources.

2. Coordination and Collaboration

The lack of coordination and collaboration within and across agencies was a persistent theme among obstacles cited by states to the provision of comprehensive services to at-risk children. The existence of parallel systems each with its own legislative mandate and eligibility criteria is a major obstacle.

The existence of multiple agencies with service responsibility for at-risk children and families often results in the absence of a standard definition for at-risk children for use by agencies, a general lack of uniform terminology and catchment areas of service, and a lack of knowledge across and sometimes within agencies of the services presently available to young children and their families.

Adding to the confusion are separate federal regulations affecting solely health, social services, or education agencies which inhibit an integrated approach. They emphasize categorical services, funds, and laws (e.g., P.L. 99-457) and fail to connect or provide a continuum of services and programs. In the latter case, services to developmentally delayed children zero to two years of age are provided by a department such as Health or Economic Security, but services to handicapped children three to five are provided by the Department of Education. One state indicated there is no provision through the education system for services to at-risk children who are three and four years old.

Another source of divisiveness is caused by differences in approach to children among agencies such as the use of a clinical model by the medical community and a developmental model by the education community. Such differences contribute to turfism and shortfalls in the delivery system. Differences in approach also create barriers to service within agencies. For example, the different orientation toward child learning and teacher preparation between special educators and early childhood educators often makes it difficult for them to identify common goals and to work collaboratively.

The need for coordinated service delivery across agencies and service providers is apparent. The failure of education, health, and social services providers to coordinate their activities results in fragmented and duplicated services and inconsistency in programming.

Data, Information, and Monitoring Systems

Identifying potential and present children at risk to target and include in the service net underscores the need for data collection, information, and monitoring capabilities. Some states need demographic data to determine the extent of needs among at-risk children. Others cite the need to develop comprehensive programs of early identification of abused and neglected children and mechanisms for identifying and monitoring at-risk children in need of immediate or later services. Finally, the need exists for consistent and uniform information on available programs.

Programming and Policy

For some states identification is only the first level of need. A continual problem is the lack of programs, programming alternatives, and services once identification is made.

Several states stressed the importance of reconceptualizing services to children with special needs, and of instituting different modes of operation.

- According to SOUTH CAROLINA, the inherent need is to acknowledge that a coordinated delivery system should provide adequate care and services to young children and their families who are at risk for a variety of reasons. Children should not be identified as deficit entities. Providing services where they are lacking should be the compelling motive of states.

- WISCONSIN indicated that this new approach must be predicated on prevention and not crisis intervention as is the current case. It must foster collaboration rather than isolation among agencies. And it must be multidimensional allowing for the best utilization of all services.

- WASHINGTON indicated that funding is tied to children already exhibiting symptoms (usually severe) and not prevention. There is a lack of understanding about the long-term commitment to serve at-risk children and the long-term planning, not quick fixes, this requires.

At base is the problem of a lack of comprehensive policy and commitment to address the needs of the at-risk child population—a theme echoed by many states. This results in:

- the absence of mandated services and requisite funding;

- the lack of a clear delineation of responsibility for services;

- imprecise definitions of at-risk populations and conditions of at risk and varying eligibility criteria and standards; and

- the lack of a central agency to plan and administer coordinated early intervention services.

In addition to the need for a comprehensive policy is the need to generate greater public awareness of early childhood issues and to enact legislation which makes children from birth to age five a priority. In some states there is little state support for identifying and serving young handicapped children other than those served under P.L. 99-457. The level of services provided from state funds is minimal compared with services for older children in this category. Indifference and inability on the part of the general public to view young children as future productive citizens are among the major obstacles to the provision of comprehensive services cited by other states.

Resources

Many states cited funding limitations as serious obstacles. A major reason many at-risk young children are not in early childhood programs is that as yet the combination of state, local, and federal funds has not provided for the program costs of personnel and facilities to serve all such children. Funds are especially scarce for optional full-day and full-year programs. States also report the lack of sufficient funds to train early childhood staff, to establish family education programs, and to provide basic health and social services.

The Federal Context for State Efforts

Direct state involvement in early childhood programs is relatively new in most states. Initiatives into the early childhood education and care arena must build upon and co-exist with the complex system of providers which currently exist. That system is comprised of nursery schools and day care centers as well as family day care homes operated by individuals and various in-home arrangements provided by family members and other care givers—all under a number of public, private, and sectarian auspices. It is also shaped by existing federal programs which span a number of areas of involvement relating to child care and other services including:

- *Tax Expenditures* (Child and Dependent Care Tax Credits, Employer-Provided Child or Dependent Care Services Tax Credit, Non-Profit Child Care Center Tax Exemption).
- *Child Care/Early Education* (Head Start, Child Care Food Program, Preschool Grants for Special Education and Rehabilitative Services, Compensatory and Migrant Education, Dependent Care Planning and Development, Special Milk Program, Child Development Associate Scholarship Program).
- *Social Services/Community Development Funding* (Social Services Block Grants [Title XX], Community Development Block Grant, Child Welfare Program)
- *Welfare and Job Training—Child Care Expenses* (Food Stamps, Aid to Families with Dependent Children, Housing Assistance, Work Incentive Program, Job Training Partnership Act, Vocational Education).

These programs are administered by diverse agencies and have different funding and eligibility requirements. Following are descriptions of selected programs and, where appropriate, examples of how states use and supplement these programs.

Federal Programs

Tax Expenditures

The *Child Dependent Care Tax Credit* provides a tax credit for a portion of child care expenses for any dependent child below the age of 15, if the expenses are incurred in order to allow the parents to work. Parents may claim up to $2,400 in child care expenses for the first dependent or $4,800 for two or more dependents. The Dependent Care Credit of 1976 amended in 1981 replaced what had been a tax deduction. The change to a credit program from a deduction was done in order to target tax benefits on moderate-income families while continuing to recognize child care costs as a legitimate employment-related expense which detracts from a family's ability to pay income taxes.

Child Care/Early Education

Head Start has been in existence since 1964 and is implemented at the local level by a number of public and private non-profit agencies. Head Start is a comprehensive education and service program targeted on low-income children ages three to five to improve their health, emotional, and social development; and to improve their thinking, reasoning, and language

skills. The program also emphasizes strong parent involvement.

Eligibility is set in accordance with the federal poverty guidelines although some children are categorically eligible (e.g., foster children in state custody, AFDC beneficiaries). Up to 10 percent of enrollment may be set aside for over-income and handicapped children. In some programs funded through the American Indians Program Branch of Head Start, Alaskan Native and American Indian children may receive priority.

Despite a long and successful track record, nationally only 16 percent (453,000) of eligible children are served. Due to inflation and budgetary limitations, few programs operate full day and virtually all are closed during the summer (CDF, FY 1989).

Nine states (ALASKA, CONNECTICUT, HAWAII, MASSACHUSETTS, MAINE, MINNESOTA, NEW JERSEY, RHODE ISLAND, WASHINGTON) and the DISTRICT OF COLUMBIA contribute funds for the Head Start match or provide additional revenues to expand the number of children served and/or to improve the quality of services.

In **NEW JERSEY** a new FY 1988 state program adds $1 million to existing fed- al funds ($30 million) for Head Start and Head Start-l- . programs (most of which operate on half-day schedules) to extend their hours for working parents.

In **ALASKA** an additional $2.8 million in state funds allows several programs to enroll additional over-income children. Currently approximately 1,000 eligible children in Alaska are on Head Start waiting lists.

In **MASSACHUSETTS** the State Head Start Program seeks to increase the number of children and their families who receive Head Start services and/or to increase the length of the program day, week, or year for current Head Start programs. The State Supplemental Grant for Salary Enhancement provides additional funds for Head Start staff salaries in order to retain and attract qualified personnel. To the $23 million in federal Head Start funds it receives, MASSACHUSETTS adds $3 million for salary enhancement and $1.5 million for program expansion.

In 1984, **MAINE** legislated $1.7 million to expand Head Start with the goal of bringing the number of eligible children receiving services up to 25 percent. An increase in funding was appropriated in 1986 to $1.9 million. There was an additional 5 percent in funding provided in 1987, and the Governor requested $100,000 to maintain the funding level for the upcoming program year.

The **DISTRICT OF COLUMBIA** public schools will soon become the largest provider of Head Start services in the District under an innovative plan that includes family day care in private homes in addition to Head Start centers. To a $1.9 million grant from the U. S. Department of Health and Human Services, the District will match $1.3 million of its own funds and open 25 new centers and license 10 family day care providers. The federal grant will allow the school district to extend Head Start services to an additional 801 three- and four-year olds including 30 disabled children. Fifty children will be served by family day care providers allowing for groups of five instead of 18 or more in conventional Head Start centers (Sklansky, 1988).

CALIFORNIA State Preschool Education Program funds are directed at children of low-income families. Preschool classes may be operated by any public agency or any private agency which meets eligibility requirements. Classes may be operated without regard to specific school sites, but preferably should be established in target areas to serve children who reside within the attendance areas of schools eligible for State Compensatory Education funds. In order for children to be eligible for entrance into a State Preschool Education Program, the children must have reached their third birthday and have not started kindergarten. Chapter 1 Preschools are supplemental to existing services if provided by the LEA. However, it is not necessary to have other locally funded preschools to use Chapter 1 funds.

The State Migrant Child Care and Development Program serves children while their parents are employed in fishing, agriculture, or related work. Migrant child care centers are open for varying lengths of time during the year depending on the growing/harvest season in each area. Children ages 0 to 2.9 years are funded out of the state funding source; children ages 2.9 to 14 are funded from the federal source.

Chapter 1 (compensatory education) of the Elementary and Secondary School Improvement Amendments (ESSIA) of 1988 provides financial assistance to schools in low-income areas to meet the special needs of educationally deprived children and requires states to monitor program improvements measured in student achievement. It also provides for parent involvement in the planning, design, and implementation of programs and for parent training and other means to work with teachers and school staff to promote program objectives in the home. Handicapped and limited English proficient children can receive compensatory services if their needs stem from educational deprivation and are not solely related to their handicapping condition or limited English proficiency. The law also applies to preschool children. As in other programs, the gap between eligible children and those served is great. In 1985, Chapter 1 served only 54 of every 100 eligible school-aged children (CDF, FY 1989).

The Chapter 1 Migrant Education Program provides services to preschool-age migrant children ages three, four, and five. Services include: education (early childhood skills and language development); health (general health screening, medical and dental follow-up services, and accident insurance coverage); and nutrition (breakfast, lunch, and snacks provided through the federal school lunch and breakfast programs).

Funds are available to state education agencies for *Programs for Migratory Children* ages three to 21. States are to establish or improve either directly or through local education agencies, programs of education for children of migratory agriculture workers or fishermen. The program requires appropriate coordination with programs administered under sections of the Higher Education Act, Job Training Partnership Act, Education of the Handicapped Act, Community Services Block Grant Act, Head Start program, migrant health program, and other appropriate programs under the Departments of Education, Labor, and Agriculture.

Even Start, Part B, of the ESSIA is designed to improve educational opportunities for children and adults by integrating early childhood education and adult education. It involves parents and children in family-centered education programs in a cooperative effort to help parents become full partners in the education of their children. The program mandates coordination with other federal programs such as Adult Education, Education of the Handicapped, the Job Training Partnership Act, Head Start, and various literacy programs.

The *Bilingual Education Act* provides funds to local education agencies (LEAs) to develop and implement bilingual programs at elementary and secondary schools, as well as activities at the preschool level, designed to meet the needs of limited English proficient children.

The Carl D. Perkins *Vocational Education Act* makes vocational education programs accessible to all persons including handicapped and disadvantaged persons, single parents and homemakers, adults in need of training and retraining, and persons participating in programs designed to eliminate sex bias and stereotyping in vocational education. Support services such as dependent care are provided to allow teen

In **MICHIGAN** programs serving infants, toddlers, and preschoolers are funded through state aid allocations or grants, as specified under state regulations and guidelines for programs such as vocational education, or student support services.

These programs are generally for the support of vocational training and/or parent education of high school students. The state appropriates $1.2 million for School Age Parents programs. The monies for these programs are used by districts to establish school-based child care centers for students. Local districts provide additional money to operate centers.

parents to participate in vocational education programs.

Through two new programs of the amended federal *Education of the Handicapped Act*, P.L. 99-457, states have received funds for planning comprehensive coordinated early intervention services across agencies to handicapped infants and toddlers and those at risk of developmental delays and their families. The Preschool Grant Program extends the rights and protections of P.L. 94-142 to handicapped children age three to five by 1990 and extends access to special education and related services, an individualized education program (IEP), services in the least restrictive environment (LRT), parent involvement in decisionmaking, and procedural safeguards.

The Handicapped Infants and Toddlers' Program of P.L. 99-457 provides funds to states for the development of comprehensive early intervention services for handicapped infants and toddlers, those "at risk" of developing handicaps, and services to families to help in their child's development. The legislation defines the population broadly as all children from birth through two years of age who are developmentally delayed (as determined by state criteria); or with conditions that typically result in delay; or are at risk of substantial developmental delay (at state discretion).

The law defines early intervention services as including multidisciplinary assessment, an Individualized Family Service Plan (IFSP), and services to meet developmental needs such as speech and language pathology and audiology, physical therapy, occupational therapy, psychological service, parent and family training and counseling services, transportation services, medical services for diagnostic purposes, and health services necessary for the child to benefit from other intervention services. The law also requires case management services for eligible children and their parents.

The legislation fosters interagency collaboration in the provision of these services by requiring the establishment of an Interagency Coordinating Council composed of relevant agencies, providers, and consumers to assist in the development and implementation of state applicants and interagency efforts.

Social Services/Community Development

Through the *Title XX Social Services Block Grant* which gives states funds for a variety of social services for low- and moderate-income people, states support child care programs although there is wide variability among states in the use of these funds for this purpose. According to the Children's Defense Fund (*Child Care*, 1987) the effects of Title XX funding cuts in recent years have resulted in less money spent by 28 states for Title XX child care programs in 1987 than in 1981 even though the numbers of low-income working families have increased significantly. A state-by-state review of services indicates long waiting lists of eligible families for Title XX supported child care.

Welfare and Job Training

Under the *Aid to Families with Dependent Children* (AFDC) program federal funds are available to states, the District of Columbia, Guam, Puerto Rico, and the Virgin Islands for strengthening family life by providing family assistance and care to needy dependent

In **TEXAS**, Title XX funded day care services are provided to children in danger of abuse or neglect, and children of low-income parents who work or are in training for employment. Day care is purchased through provider agreements and competitively procured or sole source contracted from day homes and centers which meet state licensing standards and Department of Human Services requirements. Families receiving services pay a portion of the costs in fees based on family income, unless the case is a protective services or AFDC case. Only 15.6 percent (28,659) of eligible children are served through the program.

In **MISSISSIPPI**, day care services are provided to families with incomes below 170 percent of the federal poverty level to children under school age in the custody of the Department of Public Welfare, children of an ADC parent, single parent, WIN registrant, or guardian who is working full-time or in school. About one percent of eligible children receive these Title XX funded services.

In **SOUTH CAROLINA** the Child Development Service provides day care for children outside the home for up to 10 hours per day. The program offers supervised, planned developmental activities, health screening and immunizations, nutritional meals and snacks, and diagnostic evaluations for children. The program offers parent counseling and guidance, parenting education, and assistance in obtaining needed health and social services. Transportation is provided by most child development programs. This service also provides a home-based development program which offers children and parents the same services as out-of-home care, except for nutritional meals and snacks. The service is available to eligible children who are in need of protection or children in substitute care, children who are handicapped, eligible children of working parents, or of parents in school or training. About 52 percent of eligible children receive these services.

children. Under matching formulas in the Social Security Act, approximately 54 percent of AFDC benefits is payed by the U. S. Treasury and 46 percent by the states. The federal share varies and is inversely related to state per capita income. States vary in their coverage of unborn infants and children over 18 years of age, in coverage to needy families in which the principal wage earner is unemployed, and in the availablility of workfare programs in which recipients are required to work in exchange for their AFDC benefits. (Committee on Ways and Means, U. S. House of Representatives, 1985)

The *Medicaid Program* (authorized under Title XIX of the Social Security Act) is a federally aided, state-operated and administered program of medical assistance for low-income individuals who are blind, disabled, aged, or members of families with dependent children. Within federal guidelines each state designs and administers its own program. This results in great variation among states in eligibility requirements, services, number of persons covered, and the levels of federal and state dollars spent. Since 1984, the legislation has been progressively broadened to require states to provide Medicaid coverage: to any pregnant woman or child younger than seven whose family income is below AFDC eligibility standards regardless of the family composition; to pregnant women and children (younger than five) with incomes above AFDC financial eligibility levels but below 100 percent of the federal poverty level; and in 1987, to pregnant women and infants with family incomes less than 185 percent of the federal poverty level (*A Children's Defense Budget*, 1988).

The *Supplemental Food Program for Women, Infants, and Children (WIC)* provides food assistance and nutritional screening for low-income pregnant and postpartum women and their infants as well as for low-income children up to the age of five. Program participants must have incomes below 185 percent of poverty level (states may set their upper-income eligibility limits between 100 and 185 percent) and must be nutritionally at risk. Nutritional risk is defined as: detectable nutritional conditions; health impairing dietary deficiencies; documented nutritionally related medical conditions; or conditions that predispose people to inadequate nutrition or nutritionally related medical conditions. The WIC program has been found to have a positive effect on reducing low birth weight among infants. Because WIC is a grant program, it does not serve all who are eligible. In 1983 an estimated 30 percent of income-eligible women, 45 percent of income-eligible infants, and 20 percent of income-eligible children were served. (Committee on Ways and Means, U. S. House of Representatives, 1985)

The purposes of the *Maternal and Child Health Services* block grant are to reduce infant mortality, the incidence of preventable disease and handicapping conditions among children and to increase the availability of prenatal, delivery, and postpartum care for low-income mothers. Between 85 and 90 percent of the grant appropriation is allotted for health services, however, states determine which health services to provide. (Committee on Ways and Means, U. S. House of Representatives, 1985)

New Legislation

Congress has recently completed a restructuring of the nation's welfare system in ways that emphasize parental responsibility through the enforcement of child support and expanded opportunities for self-sufficiency through employment, education, and training. The Family Support Act of 1988 requires that states establish Job Opportunities and Basic Skills Training Programs (JOBS) by October 1, 1990. In addition to the provision of basic education activities states must guarantee child care to the extent that such care is required for a welfare parent to participate in JOBS activities. States must also guarantee child care services for 12 months after the family becomes ineligible for assistance because of increased earnings if child care is necessary for employment.

In arranging child care, state agencies must take into account the individual needs of the child. Also, child care must meet applicable standards under state and local law. States are allowed to provide child care in a number of ways including contracting with providers and providing care directly or through vouchers or cash reimbursements to families. Federal funding for child care is an open-ended entitlement at the same rate the state receives Medicaid.

Beginning January 1, 1990 all states would be required to implement the AFDC-Unemployed Parent program. Under this program, two-parent families in which the principal earner is unemployed may qualify for AFDC/FSP benefits. There are also special provisions for minor parents including one which permits states to require school attendance by the minor parent and to fund training in parenting and family living skills such as nutrition and health education (Rovner, October 8, 1988).

MINNESOTA has in place several programs which show concern for at-risk families and child development. The Education for Pregnant Minors program enables pregnant minors and minor custodial parents to complete high school. The program utilizes appropriate community services and must recognize individual needs and parental responsibilities. If a youth receives social services or employment/training services, the district must develop the individual's educational program in consultation with the providers of these services. Under the Transportation Aid for Adolescent Parents program, school districts may receive state funding for transportation costs for adolescent parents who ride to and from school from a child care center. In the Adolescent Parent Planning program, adolescent parents are required to plan for themselves and their children. The plan must consider education, parenting skills, health care, living arrangements, economic self-sufficiency, and services needed to alleviate personal problems. The county social services agency is required to assist in this development of the plan when needed.

Proposed Legislation

The state role in early childhood education may be further shaped by recent congressional activities affecting child development and care and tax credits. Following are descriptions of proposed legislation.

The *Smart Start* legislation would increase the availability of early childhood development programs for three- and four-year olds and would help meet the needs of working parents by requiring that programs run for the full work day and calendar year. States would be required to match federal funds dollar for dollar and therefore would be able to leverage funds to supplement and strengthen existing early childhood programs (e.g., Head Start) or to establish new programs where they do not exist. States would be allowed flexibility in deciding which service agency would have responsibility for the programs and how to build onto existing efforts.

The *Act for Better Child Care* (ABC) would expand the availability of licensed day care for infants and older children including adolescents. ABC would allow states to contract with private providers for the care of low- and moderate-income children. It would provide for "certificates" for parents to use in paying for child care.

The Act would require states to provide a 20 percent match of funds. The greatest proportion of available funds (70-75 percent) would be used to assist parents in purchasing child care. An additional 10 percent would go to states for administrative costs. The remainder would be used to improve quality and expand supply. However, 10 percent would be targeted to Head Start expansion. States would have the flexibility to use the remaining funds for: training for child care workers; developing resource and referral programs to assist parents in finding quality care; providing grants to profit and non-profit child care providers to assist them in improving facilities and meeting federal standards; recruiting new child care providers; and improving salaries for workers.

As alternatives to the direct assistance for child care costs of the ABC bill, numerous *child care tax credit* proposals have been set forth. These proposals fall into three categories (Marr, 1988):

- The "Stay-At-Home-Spouse" Bills give tax subsidies to families with preschool children even if they do not pay for child care.
- The "Targeting" Bills reduce current tax credits for upper-income families with employment-related child care expenses and increase tax credits for low-income families.
- The "Infant" Bill gives a one-year tax boon to moderate-income families with new-born babies, but only if one parent stays home for six months.

State Actions for Early Childhood and Parent Education, and Related Services

Within the context of federal and local programs and impending legislation, states have fashioned programs and responses based on their particular needs and their capacities to support these efforts. Some of these efforts have developed from the state's education reform movement and the realization that improved student competencies and stringent graduation requirements at the secondary level must be grounded on quality elementary school and, before that, quality early childhood experiences. Other state early childhood efforts predate or parallel school reforms and simply grow out of the pressing needs of at-risk children and crises in families in all strata of our society.

State Involvement in Early Childhood Programs

State involvement in early childhood programs has been in the following areas:

1. child care subsidy programs (often supplementary to Title XX programs);
2. dependent care tax credits;
3. school-based child care, (primarily limited to services for parenting teens and training sites for vocational school students);
4. funding of special education for preschoolers;
5. state-funded pilot or statewide prekindergarten programs;
6. state-funded parent education programs;
7. state resource and referral programs;
8. supplements to Head Start in the form of matches or additional funds to expand the number of children served and/or improve the quality of service. (Marx and Seligson, 1988; Mitchell, 1988)

Additionally, states provide services to young children and families through:

9. sexual abuse prevention programs;
10. family-based care for children in foster homes, adoptions, and reintroduction/reintegration into family services.

According to the Public School Early Childhood Study conducted by the Bank Street College of Education (Marx and Seligson, 1988; Mitchell, 1988), states are a long way from providing universally available prekindergarten programs, either philosophically or financially. In 1988, about $225 million in state funds were spent for about 150,000 children. From that amount ten states appropriated more than $10 million annually. TEXAS ($46 million), CALIFORNIA ($35 million), and NEW YORK ($27 million) provide the largest total amounts, although the per child expenditure varies greatly (from $850 in Texas to over $2,500 in New York) reflecting both real differences in per child costs and proportion of state/local funds. In some states (e.g., TEXAS), the average local funding share is equal to the state per child expenditure.

MINNESOTA and MISSOURI together spend approximately $35 million on their parent education programs. These programs are provided in lieu of direct services to prekindergarten children.

State figures for prekindergarten and parent education programs pale in comparison to the over $1 bil-

lion in federal funding for Head Start programs serving approximately 450,000 children nationwide and the equivalent levels spent through SSBG/Title XX.

Including the Dependent Care Tax Credit and payments by parents, estimates for total national child care expenditures range from $7 to $13 billion.

State-Funded Pilot or Statewide Prekindergarten Programs

In 1987, 24 states including the District of Columbia provided funds for pilot or statewide prekindergarten programs (Marx and Seligson, 1988). These programs vary greatly along a number of characteristics such as:

Ages of Children Served. About half of state programs limit participation to four-year olds while the remainder allow enrollment of children between three and five years of age.

Targeted Population. The majority of state programs serve only at-risk children based on low-income status, a combination of at-risk factors, school readiness, or limited English proficiency. Other states have permissive programs under which school districts receive funds through state school attendance reimbursement formula.

Source of Program Operation and Agency Auspices. Some state programs are operated solely through the public schools; other states permit public schools to subcontract with other agencies and/or private agencies to contract with the states (e.g., ALASKA, ILLINOIS, MASSACHUSETTS, MICHIGAN, NEW JERSEY, SOUTH CAROLINA, WASHINGTON). With few exceptions (WASHINGTON, ALASKA, NEW JERSEY) state education agencies have primary responsibility for preschool programs; however, state Head Start contributions tend to fall under the auspices of other state agencies.

Teacher Training and/or Certification. About half of the states require prekindergarten teachers to have training and/or certification in early childhood education (DISTRICT OF COLUMBIA, FLORIDA, ILLINOIS, MAINE, MARYLAND, MASSACHUSETTS, MICHIGAN, NEW JERSEY, OKLAHOMA, SOUTH CAROLINA, WASHINGTON, WEST VIRGINIA) while the others do not have these requirements.

Staff:Child Ratios. Five states permit staff:child ratios in excess of 1:10 and several require ratios below this level.

Type of Mandated Program. About half of the states with early childhood efforts mandate comprehensive developmental programs (including health, social services, and parental participation). The remaining states focus primarily on a cognitive curriculum or have no curricular requirements (the case in most permissive legislation states).

Length of Program. Most state prekindergarten programs (60 percent) are half day. About 25 percent allow either half-day or full school day. Four states allow for a full working day (VERMONT, MASSACHUSETTS, NEW JERSEY, FLORIDA).

Extent of State Level Coordination. Almost all states have a state-level coordinating board representing state agencies and sometimes day care providers, Head Start, and parents (see MASSACHUSETTS, WASHINGTON, SOUTH CAROLINA, CONNECTICUT).

In **WASHINGTON** the Early Childhood Education and Assistance Program (ECEAP) is administered by the Department of Community Development (DCD). It provides a comprehensive program for preschool age children from low-income families. To be eligible, children must be three to four years of age and from families whose income is 100 percent of federal poverty guidelines. Also 10 percent of enrollment slots is reserved for Migrant and Indian children. In addition, 10 percent of slots is open to any child who needs service. The state provides $6 million for this program which serves 2,047 children.

The program has four components: program administration; education, including transition to kindergarten; health, including medical, dental, and nutrition; and social services, including parent involvement. DCD contracts with private non-profit agencies, community action agencies, school districts, and local government agencies to provide services.

CALIFORNIA supports a number of child development program models one of which is the State Preschool program. This is a part-day comprehensive developmental program for prekindergarten children three to five years of age. The program includes educational development, health services, social services, nutrition services, parent education and participation, evaluation, and staff development. State Preschool programs are administered by private agencies as well as school districts and county offices of education.

Priority for receiving State Preschool services is given to low-income families who meet eligibility requirements. Children from low-income families are eligible if they can benefit from the services provided, if their families do not speak English as a primary language, or if the children are at risk of abuse or neglect, are handicapped, or have other special circumstances that would allow them to benefit from such a program.

FLORIDA's Prekindergarten Early Intervention program has a developmentally appropriate curriculum for economically or educationally disadvantaged three- and four-year olds. It is funded through the Department of Education to local school districts which may operate the program directly or contract with licensed day care agencies to deliver services. The program stresses interagency coordination and parent education/involvement. State funds of $1.6 million support 856 children.

The **MICHIGAN** state-funded preschool program serves four-year olds identified as at risk of school failure based on a set of risk factors identified by school districts. The state provides a recommended list of factors which place children at risk of becoming educationally disadvantaged and who may have extraordinary need of special assistance. It includes: low birth weight, developmental immaturity, physical and/or sexual abuse and neglect, nutritional long-term or chronic illness, diagnosed handicapping condition (mainstreamed), lack of a stable support system or residence, destructive or violent temperament, substance abuse or addiction in the home, language deficiency or immaturity, non-English or limited English-speaking household, family history of low school achievement or dropout, family history of delinquency, family history of diagnosed family problems, low parental/sibling educational attainment or illiteracy, single parent, teenage parent, unemployed parent(s), low family income, family density, parental loss by divorce or death, chronically ill parent, incarcerated parent, housing in rural or segregated area.

The program serves 5,744 children at a state cost of $2.3 million. Additionally, local districts offer preschool programs for four-year olds which are financed through local millage and/or tuition fees.

SOUTH CAROLINA uses several types of program delivery systems. A full-day center-based child development program serves 2,152 children ranging from age three to five. (Five-year olds first participate in the half-day kindergarten program.) The home-based parent education program serves parents of 152 children who attend no preschool or live in outlying areas through an itinerant model of weekly home visits. The major child development program targets four-year olds with significant readiness deficiencies. This half-day child development program initiated in 1984 serves 8,451 four-year olds in a classroom-based child development model with an auxiliary outreach component operating in a few districts. Total state appropriation for the three delivery systems is approximately $11 million.

ILLINOIS provides $12.7 million to districts requesting programs to serve three- and four-year olds at risk of academic failure. Districts determine screening criteria, educational program, parent involvement component, and evaluation procedures. The state provides technical assistance. In FY 88, 94 programs serving 6,953 children were funded.

LOUISIANA's state-funded program for high-risk four-year olds is designed to provide a developmentally approriate curriculum and environment for its recipients. This program is restricted to children from families with annual incomes under $15,000 and from families who agree to participate in various activities associated with the program. In addition to these regulations, the child must be one year younger than the age required for kindergarten and be termed at risk of being insufficiently ready for the regular school program based on screening results. The purpose of the program is to improve the readiness of these high-risk children who will be eligible to enter kindergarten the following year.

State funds ($2.9 million) serve approximately 1,700 students. Separate state funds ($240,593) fund pilot or exemplary preschool programs serving approximately 127 students. Federal Chapter 1 funds ($3 million) supplement programs and provide for services to an additional 1,950 four-year olds at schools meeting eligibility criteria of educationally and economically deprived students.

Prekindergarten education in TEXAS was mandated by the Texas legislature in 1983 as part of the state's education reforms. The program targets four-year old children whose home environment or limited English might impede their success in school and in life. Early intervention through preschool education for these children is designed to counteract the downward spiral of academic failure and dropout. The Texas prekindergarten program is funded jointly by the state ($45.8 million) and local school districts. Additional funds are available through federally supported Chapter 1, Chapter 1 Migrant, and in coordination with Head Start programs. The state program supports 54,493 children.

MASSACHUSETTS awards grants to school committees to develop innovative early childhood programs in the following areas: programs for three- and four-year olds; enhanced kindergarten and transitional first grade classes; and day care programs for young children. To apply for funds school committees must appoint local early childhood advisory councils whose functions are to assess community needs and resources and develop early childhood programs. School systems may use the funds to contract with other agencies or providers for services. Seventy-five percent of funds statewide must go to low-income sites. In FY 1988, state funds of $10.35 million supported 13,981 children ages three to six years.

The **MARYLAND** Extended Elementary Education Program (EEEP) is a public prekindergarten education program for four-year old children, many of whom reach school with language deficits and do not have prior knowledge or the experiential base that will support school success and achievement. The program makes prekindergarten education available to all four-year olds residing in the attendance area of a qualifying school whose parents voluntarily enroll them in the program. Qualifying schools are those whose students score six to nine months below the national norm in reading comprehension at the third grade level on the California Achievement Test. Approximately 15 percent (1,603) of eligible children are served through this program. An additional 1,858 children are served with dedicated State Compensatory Education and Chapter 2 funds and selected based on Chapter 2 guidelines.

The goal of the EEEP is to provide initial learning experiences to effectively help children develop and maintain the basic skills for successful school performance. The program achieves this goal by providing developmentally appropriate experiences that address the cognitive, social, emotional and physical needs of young children. Learning is promoted in a nurturing environment through a balance of child-initiated activities and teacher-directed instruction.

State-Sponsored Family Education Programs

Several states have instituted family education program interventions to address the educational needs of young children and their families. In some states these programs have been developed in response to a range of welfare and social problems such as adolescent pregnancy and welfare dependency.

Other states have adopted a family education program focus in lieu of a strong focus on programs for three- and four-year olds. Many of these programs are based on the assumptions that:

- early childhood is a critically important time in an individual's development;
- home is the crucial place for early development to take place and the mother is the child's most significant teacher; and
- parents of young children need and will use advice and support with child rearing (Weiss, 1987).

Since 1980, 12 states have instituted family support and education programs. The oldest and most extensive programs are found in MINNESOTA and MISSOURI.

OHIO'S GRADS (Graduation, Reality, and Dual-Role Skills) Program is an in-school program for pregnant students and/or young parents in grades 7-12. Its goals are to:

- increase the likelihood that participants will remain in school during pregnancy and after the birth of the child;
- assist participants in carrying out positive prenatal and postnatal health care practices for themselves and their children;
- provide knowledge and skills related to child development and positive parenting practices;
- provide an orientation to the world of work; and
- encourage goal setting directed toward the concept of the dual-role of employee and parent.

In 1974, the MINNESOTA legislature authorized a bill to support six pilot Early Childhood Family Education (ECFE) programs. Presently 326 out of 435 districts in the state offer the program involving an estimated 75,000 families statewide.

The ECFE is a universally available program for children from birth to kindergarten enrollment and their parents. Expectant parents may also be served. The program purpose is to support and enhance the skills and understanding of parents in providing for their children's learning and development. Programs include: parent-child interaction opportunities; guided play/learning activities for children; parent and family education through discussion groups, workshops, home visits; lending libraries of books, toys, other learning materials; special events for the entire family; and information on related community resources.

The program funding level is $18 million with $7.5 million in state aid and $10.7 million in local levies.

All MISSOURI school districts offer systematic parent education and support services designed to enable parents to enhance their children's intellectual, language, physical, and social development. Participating parents receive free of cost: private visits by parent educators who are trained in child development; small group meetings with other parents of similarly aged children; monitoring and periodic screening of the child's educational and sensory development; information and referral services for needs beyond the scope of this program; and a variety of support services such as a book and toy lending library, drop-in play groups, newsletters, and social activities.

Eligibility begins at the third trimester of pregnancy through to entry into kindergarten. Services are offered to all families; however, $244,270 of state funds are used by districts to identify, recruit, and engage reluctant families (i.e., teen, low-income, low functioning, migratory/transitory, ESL, geographically isolate; single parents). The program serves 52,806 parents of children zero to three years of age and 52,114 parents of children three and four years of age. The program is funded at $11 million.

In ARKANSAS the Home Instruction Program for Preschool Youngsters (HIPPY) provides training to parents in the education of their child in the home environment. In 1987, ten HIPPY projects served over 1,000 children and 1,000 mothers. The program was initially funded with foundation money. As the program has expanded and the connection with adult education, literacy, and employable skills recognized, JTPA, Chapter 1 and 2, and local funds have been used.

The goal of CONNECTICUT's Parent Education and Support Centers is to prevent an array of childhood and adolescent problems (i.e., delinquency, child abuse and neglect, substance abuse, teenage pregnancy) by supporting families and strengthening the capacity of parents to implement effective family management practices. Each of ten Centers must provide services in the following four service categories: parent education and training; parent support; information and referral; and technical assistance, training and consultation. In addition each Center must provide child care, include specific services for fathers, and establish a parent advisory board.

Centers must provide services for all parents within their catchment area, but may offer special services for certain parents. Eligibility criteria must be non-valuative, i.e., related to school, community or neighborhood—not based on negative behavior, i.e., substance abuse, child abuse, school failure, etc. Current fiscal appropriations of $312,000 support the participation of 4,857 parents and 2,765 children.

OREGON's Together for Children (TFC) program targets funding to parents of children between the ages of zero to eight years who are assessed as at risk of failing in school. TFC programs involve a variety of approaches with a diversity of goals ranging from home visitation to peer support groups and from health care to parent education. The interdependence of family members and of families with communities is an important focus for TFC programs. Parents glean information and support from professionals, peers, and community resources while simultaneously serving as resources themselves. Rather than remediating family weaknesses, family strengths are built upon. The state funds three programs for a total of 1,000 families at a level of $266,797.

State Referral Programs

Resource and referral programs can be extremely helpful to parents seeking high quality child care that meets their needs. Programs which offer support services such as training and recruiting of family day care providers help to improve the quality of child care. Also through resource and referral programs policymakers can better assess communities' child care needs. Sixteen states and the District of Columbia provide funds to start or operate these programs.

In CALIFORNIA Resource and Referral agencies inform parents of the range of available child care services and provide parents with referrals to care givers who meet the family's child care needs and preferences. Resource and Referral programs are responsible for maintaining a resource file of services which must be updated at least quarterly. These files include types of programs available, hours of service, ages of children served, fees, eligibility requirements, and program information. Parents are referred to only licensed facilities unless there is no licensing requirement.

Resource and Referral agencies provide telephone referral services and referrals in languages spoken in the community and maintain offices that are convenient to parents and providers. Agencies document requests for services, including the number of calls received; the ages of the children to be served; the time category of the child care need; special time category needs such as nights, weekends, or swing shift; and the reason that care is needed. This information is used to provide technical assistance to existing and potential providers and to help initiate the establishment of new child care services.

State Policies for Comprehensive Services to Children Ages Zero Through Five

Because of the availability of federal funds under P.L. 99-457 (for planning comprehensive coordinated early intervention services across agencies to handicapped infants and toddlers, those at risk of developmental delays and their families by 1990), virtually all states have instituted some form of interagency coordinating council. Because the language of this law is broad and states have leeway to determine eligibility criteria, P.L. 99-457 has great importance for providing comprehensive and coordinated services for a large number of at-risk children and their families.

In response to the law, some states have fashioned their own laws and policies to ensure a coordinated comprehensive system to provide early intervention services to handicapped infants and toddlers.

Beyond services to disabled or potentially developmentally delayed children, however, many states have various types of interagency mechanisms for initiating or monitoring services to young children.

The purposes for collaboration are numerous as illustrated by the state examples cited. Multi-agency collaboration often results in: recommended legislation and the development of policies and guidelines; multi-year planning for unified family policies; regulation and licensing changes; the development of information services on child and family programs; the establishment of regional councils; and the coordination of existing services.

Few states, however, have a single agency which is responsible for the total needs of children ages zero to five or a formal policy for comprehensive services. Among the states with a formal policy are: ALASKA, FLORIDA, MISSOURI, NEBRASKA, and TEXAS.

In ALASKA, the Governor's Interim Commission on Children and Youth developed a report on what services were needed and how to provide the services. This resulted in a 1987 updated agreement between the Departments of Education, Community and Re-

Among the mechanisms for providing coordination in **CONNECTICUT** are: the Birth to Three Council—an advisory to the State Department of Education for meeting the requirements of Part H of P.L. 99-457; the Commission on Children—with responsibility for review and recommendation for legislation to the General Assembly; the Day Care Council—composed of agency heads and governor appointees to recommend day care regulations to the Department of Health Services; and the Child Welfare Reform Initiative Interim Policy Advisory Council—charged with developing a family policy which will be the basis for a multi-year plan to improve child welfare, children, and family services.

gional Affairs, and Health and Social Services. The purpose of the Tri-Department Committee on Young Children is "to support a first-class system of services for young children [birth through eight years] and their families through joint strategic planning by appropriate state agencies."

The Committee provides: effective coordination and management of comprehensive services to these children; and technical assistance and consultation to providers and consumers of services throughout the state.

The Committee is composed of the: Commissioner of the Department of Community and Regional Affairs (DCRA) or designee; Early Childhood program manager, DCRA; Commissioner of the Department of Education (DOE) or designee; Early Childhood program manager, DOE; Commissioner of the Department of Health and Social Services (DHSS) or designee; and the Early Childhood program manager, DHSS. The core committee encourages participation of others (e.g., parents, other government personnel, Head Start directors, university early childhood faculty, public and private preschool practitioners, child care providers, members of the Alaska Association for the Education of Young Children, child care resource and referral agencies).

General areas of responsibility around which strategies are being developed are:

- **Information Services**. Each Department is encouraged to collect and widely disseminate information on agency roles, early childhood services and programs offered within the Department, and to share communication on federal laws and rules and other materials of interest.

In **HAWAII,** several interdepartmental councils exist which focus on all issues affecting children including child abuse and neglect, prevention, mental health, substance abuse, health, education, and child care.

In **INDIANA**, the Interagency Task Force on Child Care includes representatives from the Departments of Welfare, Education, Health, Mental Health, and the State Fire Marshal. The Task Force is streamlining the licensing regulations for child care and will develop new legislation if needed.

In **IOWA,** a Child Development Coordinating Council was recently organized to promote services for at-risk three- and four-year olds. The Council will be composed of representatives of the Departments of Education, Human Services, Public Health, Human Rights, and area education agencies, local state universities, and a resident of the state who is a parent of a child who has been served by a federal Head Start program.

The duties of the Council will be to develop a definition of "at-risk" children, establish minimum guidelines for comprehensive early child development services for at-risk children, develop an inventory of child development services provided to at-risk children, identify the number of children which receive child development services, encourage the establishment of regional councils to facilitate the development of programs for at-risk children, and make recommendations about appropriate curricula and staff qualifications for early elementary education, and about the coordination of the curricula with early childhood programs.

In **MASSACHUSETTS**, an Inter-secretariat Task Force, convened by the Day Care Policy Unit of the Executive Offices of Human Services has developed an interagency work plan. The Department of Education is a member of the Inter-secretariat Task Force. In 1987, the Board of Education created the Bureau of Early Childhood Programs which united the Department's major early childhood programs: the Chapter 1988 Early Childhood Program; the Special Education P.L. 99-457 Preschool Grant; the State Head Start Salary Enhancement Program; and the State Head Start Expansion Program.

- **Early Childhood Statutes, Regulations, and Policy.** The Committee promotes the coordination of policy development for children under age nine. Policy development focuses on both child care facilities and pre-elementary schools and may involve additional state agencies such as the Departments of Public Safety, Environmental Conservation, and Law.

- **Community Needs and Services.** The Committee assesses community needs for early childhood services and makes recommendations for needed services. It also promotes the coordination of existing services for efficient and effective delivery.

- **Early Childhood Training and Technical Assistance.** The Commmittee will address training and technical assistance for early childhood practitioners, teachers, administrators, and parents.

- **Early Childhood Program Development.** Uniform definitions for early childhood services are being developed across agencies as well as roles, responsibilities—including training and technical assistance—and ways of avoiding unnecessary duplication.

In FLORIDA, The Handicap Prevention Act of 1986 (Chapter 411, Florida Statutes), provides for coordination of a comprehensive system of services for at-risk and handicapped children ages zero to five. Chapter 411 emphasizes the need to prevent or minimize handicapping conditions and includes a continuum of preventive services that should be available for all at-risk young children and high-risk pregnant women, including appropriate prenatal care, health care, education, and support services. Joint responsibility for establishing the continuum of services is assigned to the Department of Health and Rehabilitative Services and the Department of Education. The Commissioners of each department have an interagency cooperative agreement which delineates a structured approach to interagency coordination. This agreement requires that both agencies establish joint priorities on an annual basis. Among the priority areas initially established are services to the birth to five-year old population, child day care, and school health services.

The MISSOURI Department of Elementary and Secondary Education is responsible for administering and enforcing the Early Childhood Development Act of 1984. This Act provides a state plan and financial support for services to help parents contribute to their children's educational development, to identify and correct learning and health problems before they become significant, to provide preschool services for children with developmental delays, and to promote closer home-school cooperation duriag preschool years and throughout the child's educational career. Other state agencies play a major role in providing services to families that have needs beyond the scope of these programs. All local school districts provide services either directly or through contractual agreements with other public or not-for-profit agencies.

Several groups facilitate the implementation of this policy. The Commissioner of Education's Committee on Parents as Teachers serves as a major advocate and avenue for private funding to ensure quality programming. The Parents as Teachers National Advi-

sory Board composed of noted educational, medical, and business leaders lend their expertise and consult with the Department to keep the programs viable and effective. The Children's Services Commission, a statutory interagency board, coordinates children's programs by state agencies; facilitates the elimination of duplicate efforts, and works toward an integrated state plan for the care provided to children in Missouri. All local districts have community advisory boards composed of representatives of social services, higher education, mental health, primary health providers, Head Start, ministerial alliance, and other interested citizens. The Department of Education has been appointed by the Governor as the lead agency in coordinating services to handicapped infants, toddlers, and preschoolers. The state interagency coordinating council is actively working to integrate handicapped services with existing programs.

The purpose of NEBRASKA'S Family Policy Act is to "guide the actions of state government in dealing with problems and crisis involving children and families." It emphasizes the importance of family, schools, and community. The Act applies to every department, institution, committee, or commission of state government concerned with or responsible for children or families.

In TEXAS, House Bill 500 provides for a pilot for comprehensive education and day care for four-year old children by drawing upon the resources in the state prekindergarten, Head Start, and Title XX programs. The Department of Human Services, in conjunction with the Texas Education Agency, will plan the pilot program in accordance with the law. An interagency task force has been established to develop the pilot program involving coordination between the three agencies. The pilot program will require reorganization within the structure of existing regulations to maximize efficiency and avoid duplication of services to four-year old children.

Policy Determinations

Advocates are encouraged by the flurry of state activity on behalf of young children and their families, yet are critical of the lack of a coherent child and family policy needed to institutionalize early childhood and family education programs and related services. According to Mitchell (1988) in a talk to the chief state school officers,

> The time has come for making comprehensive cross-cutting early childhood policy; no more can we have welfare policy and education policy and employment policy and community development policy moving on different tracks. We must recognize that we are dealing in different arenas with the same families. What is required is comprehensive policies in which all arenas intersect and cooperate. The goal is an integrated unified policy for the state's children and families. (p. 18)

Early childhood educators, however, feel that quality can be easily compromised unless policymakers have a good knowledge of the existing system of child care, a thorough understanding of how young children learn and of their needs, and a feel for the issues related to the sources and auspices of early childhood and family programs and related services. Public-sector expansion into the early childhood arena has not necessarily been nor will it be a smooth affair without this level of understanding.

There are many crucial and unsolved issues which must be addressed in order for this type of cross-cutting policy to evolve and smooth transitions to be made. Among the pressing issues which state policymakers must resolve are:

- The current delineation between care and education and the implications this creates for curricula, service hours, and teacher training and compensation.
- The setting of standards and regulations to ensure quality.
- The identification of appropriate service delivery models, the determination of the range of services offered, and the collaboration and coordination efforts required for assuring services and program continuity.
- The relationship between schools and other early childhood systems.
- Given limited resources, the question of universal access to prekindergarten and services for all children or for certain categories of children.
- Ways of strengthening families and specifics of family involvement and services.
- The methods and levels for financing programs and services including resolution of wage issues for early childhood providers.

Dual Roles of Care and Education

Although states often describe the need for providing or expanding child care and/or early education, there is a growing concensus among researchers and practitioners that child care and early education are inseparable issues and must be considered as one. For example, good child care involves developmental and socialization experiences, cognitive stimulation, and physical care (Kahn and Kamerman, 1987). According to Mitchell, "Children cannot be cared for well without educating them and children cannot be educated well without caring for them." (1988, p. 3) Also parents do not necessarily separate their education and care demands, wanting both in the same convenient location and at an affordable price.

This notion obliterates many of the divisions which currently exist in early childhood programs and has great importance for the policy strategies and the structure of early childhood systems in the states.

One goal of state policy can be to eliminate the divisions between early childhood education and child care and to cull out and expand upon the best qualities of each (Grubb, 1987). This goal is not supported by state initiatives creating half-day preschool programs administered by SEAs and LEAs with little connection to existing child care programs, or increasing funds for child care but with no links to schools or preschool programs. A survey of state preschool initiatives found that no state has moved to truly coordinate prekindergarten and day care funding across state agencies (Marx and Seligson, 1988).

States can be pivotal players in the reconciliation needed between schools and the private early childhood community. States can also be key in determining purposes, methods, and control as well as cost and impact of quality programs.

Elements of Quality

States are changing their policies regarding child care and education. In many cases the trend is toward quality. While most states do not permit programs to be merely custodial, 31 states do not establish a maximum group size for preschoolers and 25 states do not set maximums for infants. Although infant/staff ratios are being lowered (a ratio of 4:1 is the mode), toddler ratios remain high.

Among other areas in need of consideration are family day care which few states regulate and teacher qualifications and training. Only about half of the states requires continuing training for teachers employed in day care centers and 42 require none for home family day care programs. Also large differentials exist in salaries of child care teachers, teachers in public schools, and those in other settings (*A Children's Defense Budget*, 1988).

1. Guidelines from Research and Experience

Research and evaluations of successful model programs provide guidelines for states attempting to improve the quality of early childhood programs.

There is general concurrence on several aspects of early childhood education associated with quality (Schweinhart and Koshel, 1986). These include:

- Small group sizes and staff:child ratios which allow for individual attention to children. Recommended is one staff member per ten preschoolers and a classroom maximum of 20 children.

In addition to education or academics, a comprehensive program should include:

- *health services* (e.g., screening for delays, physical examinations, or other direct services provided by a health professional);
- *social services* (e.g., referral to community or government agencies or assistance in obtaining services);
- *nutritional services* (such that children receive the major portion of their daily nutritional requirement during the program's hours);
- *parent services* (usually called parent involvement or parent education activities) which help parents become more effective supporters of their chidren while helping to develop themselves as adults and parents; and
- *transportation services* where this is critical for accessing programs (Mitchell, 1988).

- Staff training in child development or early childhood education resulting in an academic degree or Child Development Associate (CDA) credential.
- A curriculum based on child development learning theories and support systems to maintain the curriculum (i.e., administrative leadership, curriculum-specific evaluation and inservice training, and staff assignments that permit team planning and program evaluation activities).
- Collaboration between teachers and parents in the development and education of children including frequent communication and conferences.
- Responsiveness to the child's nutritional and health needs and to the child care and other services needs of families.

The National Association for the Education of Young Children's (NAEYC) standards for developmentally (both age and individual child) appropriate programs provide a widely recognized comprehensive definition of early childhood education. NAEYC guidelines should be reviewed for many of the specifics of the above. According to NAEYC guidelines, a major determinant of program quality is the extent to which knowledge of child development is applied in program practice.

Early childhood educators also maintain that education cannot be meaningfully provided particularly for at-risk children without offering additional services. This is important because these children often have a cluster of risk factors in their lives.

According to Bowman (1988),

> In order to be effective, intervention programs must provide a match between the risks to which the child is exposed and the intensity and breadth of the intervention. Interventions that only include classroom educational programs are usually insufficient for children at risk. Poor children may need health, nutrition, and psychological services; young children with disabilities need a wide range of services as well as specific therapies. Parents of both groups of children need support and involvement. Single purpose services are generally inadequate for high-risk populations. (p. 6)

The principle of comprehensive services is one on which Head Start is founded and around which many of the earliest and most successful state-funded programs are modeled.

Parent involvement and family services are components most often related to effective early childhood programs. Without a family component, many experts believe the cognitive and social goals for at-risk children cannot be sustained. Child advocates acknowledge a groundswell of consensus reflected at the state and local levels that families need help and that government has a role to play in providing that help. According to Marian Wright Edelman of the Children's Defense Fund, "If you want to save the babies, make sure the mother has access to prenatal care, to immunizations, to knowledge of basic parenting skills, and to day care that will allow her to continue her education or get a job" (Lewin, March 1988).

Early childhood programs can also become catalysts for promoting parents' personal development in areas such as literacy attainment. This approach is evident in KENTUCKY's Parent and Child Education (PACE) programs for parents without high school diplomas. Parents receive training in adult education while the children attend a preschool program. During planned times, parents work with their children in classrooms and have opportunities to help their children learn. Fifty-one counties having 60 percent or more of adults without high school diplomas are eligible to apply for programs.

The general goal of family education is to promote parental competencies and behaviors and familiar conditions that contribute to child, maternal, and familial development.

Programs typically provide information on child and adult development; guidance on parenting and child rearing practices; information and referral to other agencies; and general encouragement and emotional support. School-based programs have stressed strengthening the child's early learning environment and reinforcing the role of parents as the child's first teachers (Weiss, 1988).

In addition to family education, family involvement is often stressed (particularly in Head Start programs). Here family support focuses on developing social networks and resources and parent improvement by promoting confidence and control in the lives of family members and in the programs of their children.

The effectiveness of a comprehensive community service model using a two-generational approach is evidenced in the Avance Educational Programs for Parents and Children in San Antonio, Texas. This is a multi-service family support program which coordinates existing services and uses the school as a resource to draw on for vocational and adult basic skills training.

States vary widely in the range of comprehensive services provided in their early childhood programs. Whereas some states support comprehensive programs that provide education, full-day child care and other services, many programs recently enacted are limited pilot programs for half-day preschools which enroll at-risk four-year olds. Some of the newer efforts build upon the Head Start model. The difference is that instead of providing direct comprehensive services, programs are establishing linkages to other community service providers—a direction motivated by concern for cost effectiveness and the recognition of the enormous potential resources that other agencies bring to any early childhood effort, especially those involving at-risk children and families.

For the past 15 years the Avance Educational Programs for Parents and Children have helped low-income high-risk parents in Hispanic communities prepare their children for school and for life. Parents of children under the age of three attend a comprehensive community-based program. The mother attends a center-based program for three hours weekly for nine months.

The curriculum consists of lessons on the child's physical, social, emotional, and cognitive development; effective discipline techniques; personal coping techniques and problem solving. Verbal communication whether in English or Spanish between parent and child is emphasized. In addition, the Avance staff goes into the home twice a month to videotape the parent and child at play. The mother receives continuous feedback from staff and participants who view videotapes. The parent is exposed to different resources in the community that could help them alleviate stress. Speakers supplement the Avance curriculum with such topics as first aid and preparation of nutritious meals. While parents learn, their preschool children are enrolled in the Avance Daycare program. Avance offers English, GED, and college classes to the parents and brings teachers from Region XX in Texas and the local community colleges to provide these services. A fatherhood project has also been initiated. Finally, Avance is about to embark on an economic and community development focus to help individuals find employment or to be self employed in cottage-type industries (Rodriguez, 1988).

2. Models of Programs Providing Comprehensive Services

State and local agencies have developed a number of coordinating and collaborating mechanisms for planning and providing comprehensive service delivery because:

- increasingly this is required by state law;
- the executive branch often initiates cooperation among agencies;
- federal law is encouraging and often requires coordination of services;
- providers, advocacy, and parent groups are exerting pressure for better coordinated programs and policy;
- case-management in bringing together different disciplines around the needs of a particular child is proving effective in addressing problems of at-risk children and families;
- mounting evidence about the effectiveness of interventions aimed at child well-being rather than traditional definitions of child welfare, health, and education has caused a shift in thinking among professionals that encourages cooperative efforts (Petit, 1988).

There are numerous examples of comprehensive service delivery models currently in use by local and state agencies. They illustrate how delivery systems can be expanded to include the existing early childhood ecosystem and how public and private agencies can work together to provide child and family services.

Rather than leaving education in the classroom and services in the community, the NEW YORK Education Department has developed a demonstration community schools project funded at $1.5 million. Ten demonstration elementary schools in disadvantaged neighborhoods are serving as bases for the provision of a wide range or social, health, recreation, and instructional support services for students and families. Each community school will open nights, weekends, and usually during the summer and most will offer a preschool and/or child care program.

Among the chief components necessary for making the community school concept a reality in New York are assessments, resources, and support.

The pilot schools are expected to use a substantial portion of their new resources to build bridges to the social services community. It is up to their advisory committees to determine what connections they will try to establish.

This requires an assessment of the needs of students and parents. Next comes the task of identifying what services are available. From a list of major service areas provided by the State Department of Social Services, the advisory committee specifies the major organizations offering the service in the community and their capacity to meet the identified needs. The social services department also supplies a comprehensive annotated list of governmental funding sources for children and family services and an inventory of current requests for proposals to supplement the committee's informational base.

Demonstrations such as this evidence a basic and important resource problem for schools when drawing on social services—space. Hence the need to become knowledgeable about facilities adjacent to the school or ways of using existing facilities more efficiently during the regular school day or during off times. However, to fully address the resource needs of the community program and to capture the full commitment of other service agencies requires a jointly funded initiative of the Departments of Education and Social Services.

Support is required not just at the administrative level of agencies but from teachers in the schools and from families. In the latter case this involves parent outreach and involvement in the planning process and in the development of services responsive to their needs. Potential activities for parents include: tutoring and homework assistance programs; a summer preschool program that involves parents in field trips; workshops on tenants' rights offered by a local social services department in response to a critical problem of geographical mobility for families; and a school-based health clinic.

Advocates such as Barbara Blum, President of the Foundation for Child Development, view local demonstrations as the appropriate level to work through the dynamics of interagency efforts. "Given the near impossibility of sweeping systemic changes, it is likely that only when officials encounter the real-life need to work together toward a common goal in one particular program that they will figure out how to create integrated services." (July 20, 1988, p. 7) NEW YORK STATE's demonstration community schools project is a working model of interagency efforts to provide comprehensive services.

NEW YORK CITY's Giant Step program illustrates how a comprehensive child development program can be coordinated citywide. It is operated by a neutral entity, the newly established Mayor's Office of Early Childhood, in collaboration with the Agency for Child Development (traditionally responsible for child care and Head Start), and the Board of Education. Together, these three entities plan each facet of the program so that guidelines, staffing and program development, professional development, and monitoring of evaluations are standardized whether the program sponsor is Head Start, child care, or the public school.

3. Diversified Systems of Child Care and Education

Researchers concede that a good early childhood program can take place in any setting with adequate physical, financial, and personnel resources. They also agree that no delivery system is perfect, but can benefit from models of good practice. Whether cen-

CALIFORNIA has made a massive investment of general revenue funds into a diversified system of prekindergarten programs. Children's centers, county contract centers, and innovative programs all operate under the same regulations and guidelines and are referred to as *General Child Development programs*. Facilities in these programs are usually open 10 to 12 hours each day, five days a week, all year round. Child Development programs serve infants (up to two years ten months old), preschool-age (over two years ten months to five years old) children, and school-age (six to fourteen years old) children. Programs are operated at the local level by private agencies, school districts, offices of county superintendents of schools, cities, colleges, and other public agencies.

Services include developmental activities, health and nutrition, parent involvement, staff development, and evaluation. General Child Care programs provide age-appropriate activities for children in supervised settings. Social services, including identification of children's and families' needs as well as referral to appropriate agencies are also provided. Unconventional care at times such as nights, weekends, care at the worksite or even temporary emergency care, and child care for ill children may also be provided by some General Child Care programs.

Additionally the *Center-Based Title 22* program established by Chapter 36, Statutes of 1977 is an alternative to traditional child care. Services provided are comparable to those provided in the General Child Care programs with the difference being the use of the Title 22 child:staff ratios with resultant savings in the cost of child care.

The *State Preschool* programs described in the previous chapter are targeted on children from low-income families who can benefit from the comprehensive developmental program. These programs are administered by private agencies as well as by school districts and county offices of education.

Other programs include the *State Migrant Child Care* program; *Campus Child Care* to serve the children of students attending public and private colleges; the *School-Age Parenting and Infant Development* program for children whose parents are completing their high school educations; the *Severely Handicapped Child Care* program to provide equal access to child care for children with exceptional needs; *Family Child Care Homes* through which the Department of Education contracts with various agencies to administer a payment program for parents wishing to have their children cared for in family child care homes; and the *Alternative Payment* programs, created to provide maximum parental choice for child care and development programs, which provide subsidies that families may use to purchase care from licensed child care providers.

Under the Zigler Plan the schools could operate: 1) a formal education system starting with half-day kindergarten; and 2) a child care system run by individuals with expertise in young children and family support. This dual purpose system would also provide extended before- and after-school developmental care and education for three- and four-year olds and before- and after-school and vacation care on site for 6 to 12-year olds. The system would provide for home visits to parents of infants as in Missouri's Parents as First Teachers model, and for children under the age of three. A family day care component would monitor, train, and upgrade home providers. Parental leave and government subsidies would enable parents to care for infants in their own home.

To limit expenses associated with the recommended long day and low child:staff ratios with college-trained credentialed teachers, Zigler proposes that only part of the day would be staffed by such teachers offering formal early childhood teaching. The remainder would be staffed by staff with less formal credentials receiving lower salaries. Programs for three- and four-year olds would rely heavily on teachers with child development associate (CDA) credentials and aides. He proposes applying federal standards to all programs regardless of subsidy.

The system would be open to all children and parents—in the short-term to be paid for by a fee system subsidized for affordability and in the long-term to be supported by property taxes.

Currently there are 13 Twenty-First Century Schools operating within two school districts in MISSOURI.

ters, homes, nursery schools, Head Start, sectarian, or public school settings—each has its own strengths and weaknesses. It is preferable for states to support the development of a system that is flexible and responsive to the needs of children and families but which has built-in quality controls and standards.

Under an alternate model the school system would continue education programs for children of mandatory school age but would be encouraged to develop stronger links with early childhood programs in the community and to develop appropriate care and education programs for all ages of children. Day care and early education programs would continue under the present wide variety of providers.

This plan relies on a differential staffing pattern to increase salaries and to maintain low child:staff ratios. Salary scales would be developed that reward education and longevity on the job for levels of staff (e.g., aides, assistants, teachers, lead teachers, program directors, executive directors). Private programs would be regulated through state licensing and programs in schools would meet state education department standards no less stringent than those used in licensing private programs. New family day care providers would be recruited.

Parents would receive centralized referral services and consumer information. The cost of the system would be borne by parents based on their ability to pay and public and private sources of funds would be used to make up the difference. An improved federal tax credit for parents is deemed most effective in allowing for maximum choice of program and direct subsidy the most efficient way of impacting low-income families. Government agencies would be encouraged to provide services directly or to purchase child care and education programs by voucher or contract. States could build this system through public funding and private partnership.

This flexibility involves the need to provide for both half- and full-day programs and care at unconventional times such as evenings, weekends, and holidays. It also involves establishing relationships with public and private providers which have traditionally provided an array of affordable education and social services.

Several states actively recognize and use the resources of private (for-profit, non-profit, and sectarian) service providers. MAINE contracts for services through religious organizations. To be eligible for state funds these groups set up foundations and must comply with affirmative action and equal opportunity laws.

CALIFORNIA and SOUTH CAROLINA are states which have crafted diversified models of child care and education which utilize numerous elements of the existing early childhood system.

4. Other Proposed Models

In addition to existing models, several versions of child care systems have been proposed by experts in the field. Zigler has set forth a vision of schools as the hub of a child care system (Morgan, 1987; Zigler, 1988). Through his School of the Twenty-First Century, he advocates a return to the community school as a center for the social services required in neighborhoods. He views this as a proper use of the nation's $2 trillion investment in school buildings and as an optimum delivery system of early childhood services.

A second model (Morgan, 1987) builds on the existing differences in program forms and auspices of the existing system but strives to improve quality, link services, match supply and demand, assure accessibility and affordability, and preserve the element of parent choice and program autonomy. This model is a community-based Resource Center that provides support services to providers and parents and permits program autonomy within standards and entrepreneurship.

Regulating, Legislating, and Funding Quality

Early childhood advocates are concerned about how high quality early childhood programs can be replicated and expanded into publicly-supported settings as state-supported initiatives become more prevalent. States through their responsibilities for setting standards, controlling licensing, monitoring operations, and funding programs are key to the development of quality systems. However, states vary widely in how they carry out these responsibilities and are bound to respond differently to such problems related to program quality as lack of child development personnel training; low wages and per pupil expenditures; high turnover of staff; and inappropriate pedagogical and evaluation procedures. Of specific concern are:

- how schools will move from the tradition of teacher-centered structured activities and formal academics to the child-centered experiential activities critical to developmentally appropriate early childhood curriculums;
- how to assure optimum teacher-student ratios of 1:10 and below—ratios which are essential to maintain the interest, participation, and persistence of young children;
- how parity can be established among teachers and care givers in areas of salary and benefits, training, and credentials for certification; and
- how new efforts can be integrated with the existing public (Head Start) and private delivery systems.

Criticisms leveled against public school involvement in early childhood education programs are often based on the facts that: a) staff:child ratios in most public schools are at least 1:20; b) in the past public schools have often excluded parents from the education process and have often failed to meet the needs of non-white ethnic groups and of working parents; c) schools may adopt an academic skills focus for four-year olds rather than a child development focus; and d) schools may exclude existing community child care services and perhaps put them out of business (Schweinhart and Koshel, 1986). These concerns have led some to recommend creation of strong new divisions and administrative systems at both the state and local levels in order to achieve the program priorities of age-appropriate developmental programming, family involvement, and comprehensive services.

Quality and program content are difficult to legislate but advocates agree that state legislative direction is critical. In the absence of federal government standards for child care programs receiving federal funds, state early childhood program standards, while varying widely, are the primary source of protection for children being served. Advocates like the Children's Defense Fund have demonstrated that standards do

make a difference in child care quality of care. This difference is shown, for example, in the higher levels of consumer complaints about unlicensed and unmonitored family day care and child care centers than for home-based and center programs subjected to higher standards and monitoring (*Child Care*, 1987).

1. Current Experience

To date, state standard setting appears to have both strengthened and undermined program quality for young children. This can be seen in examples of prekindergarten program licensure, minimum expenditures, staff credentialing, and assessment requirements.

Prekindergarten licensure. In states where prekindergarten programs operate under the general school code, programs tend to be subject to standards of school attendance and teacher certification applicable to kindergarten. Also states that provide funding for kindergarten programs through legislative and regulatory initiatives typically address staff qualifications, class size, and staff:child ratio (Trostle and Merrill, 1986).

State support for prekindergarten programs is generally less than $1,000 per child for part-day programs but may run as high as $2,700 per child. Some states require contributions for staff or program funds from local districts.

Costs. Perhaps the greatest fear of early childhood advocates is that states in their haste to provide for a maximum number of children will legislate and finance early childhood programs at per-child levels insufficient to provide high quality programs. According to Schweinhart and Koshel (1986), "With limited funds, it is probably better to provide high quality programs to some children than to provide inferior programs to a larger number of children" (p. 20).

High quality programs do not come cheaply. Policymakers investing $2,700 per child are being unrealistic and unfair if they expect noteable long-term outcomes from low-income children such as the results associated with the Perry Preschool program which operated at $5,000 per child in 1981 dollars (Weikart, 1988). This program was known for high teacher salaries and teacher ratios and numerous ancillary services.

Another concern is that by increasing child slots without addressing the salary issue or staff:child ratio is to be confronted with programs with less than optimal staff and inappropriate learning environments for children. There is need for policymakers to push for salary enhancements such as those undertaken in NEW YORK and MASSACHUSETTS. A related need is to plan for and initiate an extensive training program to provide an appropriate number of teachers and staff to implement early interventions.

Staff credentialing. One aspect of quality supported by research and experience that does not entail higher expenditures is the finding that the teacher-training component that matters most is specific preparation in early childhood development, not formal years of schooling. This suggests that a teacher with a Child Development Associate credential would be preferable to someone with a B.A. level teaching certificate but without early childhood training (Grubb, 1987).

As states develop guidelines for credentials for both professionals and paraprofessionals to ensure staff quality, competent performance in developing children rather than traditional academic preparation should be emphasized.

Assessment requirements. Several states have entered into the controversial area of testing young children. The fervor of education reform and the desire of parents for evidence of academic achievment at the earliest ages have resulted, in some places, in the introduction of inappropriate teaching and assessment methods and unrealistic expectations for young children. Such actions ignore that informal teaching, dependent upon the child for direction and pacing, is appropriate to the learning styles of young children. This is very different from the skill-specific formal instructional approach characteristically used for children in the elementary grades.

Due to the developmental characteristics of young children (i.e., enormous individual variation and spurts of rapid development) as well as their social and emotional states, traditional child assessment and evaluation strategies are not particularly suitable. Yet standardized developmental screening or readiness tests are routinely administered in many school districts for admittance to kindergarten or promotion to first grade. Critics of this policy cite the potential for these practices to result in negative outcomes such as early tracking (i.e., to developmental kindergarten), retention and use of "transitional" first grades; long-term harmful effects of retention on a child's self-esteem; differential treatment of minority, low-income, and limited English proficient children; and test driven prekindergarten and kindergarten programs (NAEYC, 1987).

Since there is no available school readiness (as contrasted to developmental screening) test accurate enough to screen children for special programs without a 50 percent error rate, the NAEYC counsels against the use of such tests. The use of standardized tests for young children is recommended only as a mechanism for improving services to the individual child. Multiple measures should be relied on when the goal of the assessment is enrollment, retention, or assignment.

Recently policymakers in several states have reconsidered the issue of testing programs for young children (Gold, 1988):

- The NORTH CAROLINA legislature recently passed a measure prohibiting the use of standardized tests by districts for first and second graders and directing the state board of education to provide more appropriate assessment tools. Last year statewide standardized tests of first and second graders was banned.

- In ARIZONA, the legislature has limited standardized testing of first graders to a sample while alternative assessments are being developed.

- CALIFORNIA's school readiness task force has called for drastically altered assessment methods as part of a plan for an appropriate and integrated experiential education program for four- to six-year olds.

- The GEORGIA School Boards Association has opposed the use of formal school readiness tests.

- The MISSISSIPPI Education Department has halted the state's testing program of kindergarten students set for next year amid concerns that the test is shifting the kindergarten curriculum away from developmentally appropriate approaches and toward formal instruction.

2. Models for the Future

In some cases state legislative action has resulted in poor quality program standards such as large pupil/adult ratios and limited staff training in publically funded preschool programs. Advocates feel these types of problems can be overcome through improved public sector knowledge of early childhood education principles and increased consultation with the early childhood community.

MARYLAND assures quality Extended Elementary Education programs by maintaining the following:

- Adult-child ratio of 1:10 with a group size of no more than 20.
- A teacher certified in early childhood education and a full-time aide for each class.
- A program supervised by persons qualified in early childhood by education and experience.
- A realistic, clearly stated, written plan for program operation.
- A curriculum that specifies what teachers must teach and what children are expected to learn.
- A balanced instructional program that includes developmentally appropriate activities and a conducive learning environment for young children.
- Parent participation that focuses on joint efforts among the home, school, and community.
- Staff development programs that focus on strategies for increasing staff competencies and expertise in early childhood education.
- Collaborative evaluation of prekindergarten program effectiveness with results utilized for program improvement.
- Recognition of the prekindergarten program as a part of a continuum that extends through the primary grades.

In seeking to improve the quality of delivery systems, policymakers are advised to use regulations judiciously and to promote professionalism that fosters the pursuit of excellence (McDonnel & Elmore, 1987; Timar & Kirp, 1987 in Schweinhart, 1988). Recommended are policy instruments such as: financial grants, resident monitoring of program quality (possible only in cases where supervisors are early childhood specialists); flexible program accreditation criteria such as that used by Head Start and the NAEYC of defining the "ideal" program and levels of quality above the minimum; and various types of staff development including state-of-the-art preservice training in early childhood and continuous inservice training with exemplary early childhood programs serving as centerpieces of a staff development strategy.

Some states have been able to put in place high quality programs which reflect point-for-point the standards and best practices valued in early childhood programs. In FY 1988 MARYLAND will spend approximately $3.3 million to serve 2,820 four-year olds while CALIFORNIA anticipates spending $35.5 million to serve 19,221 four-year olds (Marx and Seligson 1988).

The recommendations developed by the California School Readiness Task Force also reflect the actions on the part of states to develop quality programs and to properly integrate them into the primary grades. Additionally, the state has developed a number of program quality review instruments applicable to infant and toddler, center-based preschool-age, family child care, and school-age programs. Another state, MICHIGAN has also developed a set of quality and curriculum guidelines.

The CALIFORNIA School Readiness Task Force was charged by the state Superintendent of Public Education with developing recommendations for implementation that will substantially improve the quality and quantity of services offered to young children. The Task Force recommendations indicate:

- An appropriate, integrated, experiential curriculum should be provided for children ages four through six; and class size should be reduced to allow for this instruction.
- Programs should meet the special needs of culturally and linguistically diverse students, as well as the needs of exceptional children.
- Classroom organization and teaching methods should reflect the heterogeneous skills and abilities of children in the early primary programs.
- The staff of the early primary programs should receive appropriate education, training, and remuneration.
- Full-day programs should be an option; programs should also provide before- and after-school child care or links with child development programs for children who need this care.
- Assessment methods of children in early primary programs should be drastically altered.
- Funding and facilities must be made available to support the early primary programs.
- Parent involvement should be encouraged.
- A public awareness campaign should be launched describing appropriate learning practices for children ages four through six.

MICHIGAN'S Standards of Quality and Curriculum Guidelines are designed to assist local educational agencies in the assessment of any prekindergarten program (regardless of the funding source); and the design of new prekindergarten programs to meet the unique needs of young children. These standards address: class size (15-18); teacher-pupil ratio (1:8); developmentally appropriate curriculum; staff training and credentials; parent and community involvement; and others. Michigan has committed $15 million to serve four-year olds in preschool programs and to implement the standards and guidelines beginning September 1988.

Universal Access vs. Targeting of Programs

According to Kagan (1988), "In our current system of care and education, there is no equity, no comparability and uneven access." (p. 17) Concerns relating to equity and the high cost of quality programs have fueled much of the discussion around whether to provide programs and services to targeted groups, to make these programs and services universally available, or available on a fee appropriate/sliding scale basis. Arguments for inclusiveness center on an emerging awareness that all children are at risk to some degree and therefore will require prevention or intervention services at one point or another. Also according to Petit (1988), "Programs which fare best, and the ones people feel better about using, are those perceived as being available to anyone who needs them irrespective of income—and therefore free of stigma. Public education is perhaps the best and single enduring example." (p. 5)

Policies which support this position often help to garner the public support required when new program initiatives such as prekindergarten or parent education are planned and reduce stigma to children and families in need of intervention services. Additionally new programs are given a wider and more stable financial base if participant eligibility is determined by objective criteria and financed by formula calculated on the number of eligible children and families per district rather than through yearly budget requests.

An inclusive policy is atttributed to the success of programs such as Missouri's Parents as First Teachers program. The Missouri legislature would not consider a program limited to low-income families but rather chose a permissive program supportive of the development needs of all families of preschool children. The program allows for special outreach for hard-to-reach, high-risk parents.

Offsetting costs for services with supplemental financial support from those who can afford it on a sliding fee basis is a way of ensuring the availability of services to all who need them. Some experts feel that this is a viable path to pursue even in the realm of public agencies. It is an approach which has precedent in the health care field—one which consumers will support if vital services can be brought together and purchased on an as needed basis. This approach may be workable especially where there are shortages of certain types of child care services (e.g., infant, sick child, and after-school care). Others see the creation of a two-tiered system wherein the resource rich opt for services which others make do without.

Arguments for targeting of services to high-risk and the neediest populations principally center on costs and the fact that the benefits to low-income children of early childhood program participation are more starkly evident than those to wealthier children. In contrast is the view that by increasing services to the neediest without addressing the need to ensure racially and economically integrated environments is to reinforce a segregated system of early childhood education.

This concern and the feeling that the schools are best positioned logically and intuitively as the locus of resources and services has led advocates to recommend a system of early childhood education that is: 1) universally available; 2) publically financed; and 3) voluntary. Although plans for financing such a system

have been proposed—e.g., the Children's Trust advanced by Jule Sugarman (n.d.) would be funded through payroll taxes collected from employers and employees—the political realities for such a national solution are grim. An interim recommendation approach is to rely upon collaborations among service providers and local, state, and federal agencies for improvements in the system (Kagan, 1988).

In addition to the funding proposals described previously in this paper, Grubb (1987) describes additional funding options open to states. The cost-related decisions that states make initially about the size and scope of their programs (e.g., eligibility of children, range of operating hours, adult:child ratios and wage levels, capital outlays and ancillary services) as well as the division of total costs (e.g., among local revenues, parent contribution, federal matches) affect the level of state outlay to be required. Among the funding mechanisms available to states are to: expand existing programs such as Head Start; expand state tax credits; provide project funding via proposals with only school districts eligible, school districts eligible with subcontracts allowed, or districts and community-based organizations eligible; formula fund using existing school aid formulas or new aid formulas specifically for early childhood services; provide vouchers to parents restricted or unrestrictred to programs of specified quality, or provide vendor payments for services.

Another funding strategy is to encourage business-supported child care offered as a work benefit, and other corporate ventures or public-private partnerships.

In the immediate future states are likely to experiment with a variety of funding strategies. Ultimately, what will be necessary is a partnership among governments—federal, state, and local—and the private sector both as sources of funding and providers of services.

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